County: Fond Du Lac Facility ID: P280 Page 1 TRANSITIONAL CARE UNIT

430 EAST DIVISION STREET

FOND DU LAC 54935 Phone: (920) 926-4700 Ownershi p: Non-Profit Church Related Operated from 1/1 To 12/31 Days of Operation: 366 Highest Level License: Skilled Operate in Conjunction with Hospital? Yes Operate in Conjunction with CBRF? No Number of Beds Set Up and Staffed (12/31/00): 18 Title 18 (Medicare) Certified? Yes Total Licensed Bed Capacity (12/31/00): 18 Average Daily Census: 12 Number of Residents on 12/31/00: 17

Services Provided to Non-Residents	Age, Sex, and Primary Diagn	Length of Stay (12/31/00)					
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	100. 0
Supp. Home Care-Personal Care	No					1 - 4 Years	0. 0
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	0.0	More Than 4 Years	0. 0
Day Services	No	Mental Illness (Org./Psy)	0.0	65 - 74	23. 5	[	
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	52. 9		100. 0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	23. 5	************	********
Adult Day Health Care	No	Para-, Quadra-, Hemi plegi c	0.0	95 & 0ver	0.0	Full-Time Equival	ent
Congregate Meals	No	Cancer	11.8			Nursing Staff per 100	Resi dents
Home Delivered Meals	No	Fractures	23. 5		100.0	(12/31/00)	
Other Meals	No	Cardi ovascul ar	23. 5	65 & 0ver	100.0		
Transportation	No	Cerebrovascul ar	0.0			RNs	33. 5
Referral Service	No	Diabetes	0.0	Sex	%	LPNs	6. 5
Other Services	No	Respiratory	0.0			Nursing Assistants	
Provide Day Programming for		Other Medical Conditions	41. 2	Male	41. 2	Aides & Orderlies	30. 0
Mentally Ill	No	Ì		Female	58. 8	i I	
Provide Day Programming for		İ	100.0			İ	
Developmentally Disabled	No				100. 0	I	

Method of Reimbursement

		Medi	care		Medica	ai d											
		(Titl	e 18)	(	Title	19)		0th	er	P	ri vate	Pay	1	Manage	d Care		Percent
			Per Die	n		Per Die	m		Per Die	m		Per Dien	n		Per Diem	Total	Of All
Level of Care	No.	%	Rate	No.	%	Rate	No.	%	Rate	No	. %	Rate	No.	%	Rate	No.	Resi dents
Int. Skilled Care	0	0. 0	\$0. 00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0%
Skilled Care	-		\$228.00	0	0. 0	\$0.00	0	0. 0	\$0.00	1		\$370.64	0	0. 0	\$0. 00 \$0. 00	17	100. 0%
Intermediate				0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0.0%
Limited Care				0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Personal Care				0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Residential Care				0	0. 0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0. 0%
Dev. Di sabl ed				0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Traumatic Brain In	j. 0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Ventilator-Depende	nt 0	0.0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0.0	\$0.00	0	0.0%
Total	16	100.0		0	0. 0		0	0.0		1	100.0		0	0.0		17	100.0%

TRANSITIONAL CARE UNIT

Nursing Care Required (Mean)\*

Admissions, Discharges, and		Percent Distribution	of Residents'	Condi t	ions, Services, a	nd Activities as of 12	2/31/00
Deaths During Reporting Period							
					% Needi ng		Total
Percent Admissions from:		Activities of	%	As	sistance of	% Totally	Number of
Private Home/No Home Health	1.6	Daily Living (ADL)	Independent	0ne	or Two Staff	Dependent	Resi dents
Private Home/With Home Health	0.0	Bathi ng	47. 1		47. 1	5. 9	17
Other Nursing Homes	0.0	Dressi ng	47. 1		52. 9	0. 0	17
Acute Care Hospitals	96. 1	Transferring	35. 3		64. 7	0. 0	17
Psych. HospMR/DD Facilities	0.0	Toilet Use	41. 2		47. 1	11. 8	17
Rehabilitation Hospitals	2.3	Eating	82. 4		17. 6	0. 0	17
Other Locations	0.0	*************	******	*****	*******	*******	*******
Total Number of Admissions	306	Continence		%	Special Treatmen	nts	%
Percent Discharges To:		Indwelling Or Extern	nal Catheter	0.0	Receiving Resp	pi ratory Care	23. 5
Private Home/No Home Health	<b>56. 4</b>	0cc/Freq. Incontiner	nt of Bladder	17. 6	Receiving Trac	cheostomy Care	0. 0
Private Home/With Home Health	12.8	0cc/Freq. Incontinen	nt of Bowel	5. 9	Recei vi ng Suct	ti oni ng	0. 0
Other Nursing Homes	10. 2				Receiving Osto	omy Care	5. 9
Acute Care Hospitals	6.6	Mobility			Recei vi ng Tube	e Feeding	0. 0
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	0.0	Receiving Mecl	hanically Altered Diet	s 5.9
Rehabilitation Hospitals	1.0						
Other Locations	7. 9	Skin Care			Other Resident (	Characteristics	
Deaths	5. 2	With Pressure Sores		17. 6	Have Advance l	Di recti ves	52. 9
Total Number of Discharges		With Rashes		5. 9	Medi cati ons		
(Including Deaths)	305	İ			Receiving Psyc	choactive Drugs	23. 5

Thi s Other Hospital-Al l Facility Based Facilities Facilties % % % Ratio Ratio Occupancy Rate: Average Daily Census/Licensed Beds 66. 7 87.5 0.76 84. 5 0.79 Current Residents from In-County 88. 2 83.6 1.06 77. 5 1.14 Admissions from In-County, Still Residing 4. 9 14. 5 0.34 21.5 0.23 Admissions/Average Daily Census 2550.0 194. 5 13. 11 124. 3 20. 52 Discharges/Average Daily Census 2541.7 199.6 12.73 126. 1 20. 16 Discharges To Private Residence/Average Daily Census 1758.3 102.6 17. 14 49.9 35.27 Residents Receiving Skilled Care 100.0 91. 2 1. 10 83. 3 1. 20 Residents Aged 65 and Older 91.8 1.09 87. 7 1.14 100.0 Title 19 (Medicaid) Funded Residents 0.0 0.00 69. 0 0.00 66. 7 Private Pay Funded Residents 5. 9 23. 3 0. 25 22.6 0. 26 Developmentally Disabled Residents 0.0 0.00 7. 6 0.00 1.4 Mentally Ill Residents 0.0 30.6 0.00 33. 3 0.00 General Medical Service Residents 41.2 19. 2 2.14 18. 4 2. 23 Impaired ADL (Mean)\* 28. 2 51.6 0.55 49. 4 0.57 Psychological Problems 23. 5 52.8 0.45 50. 1 0.47

7.4

0.94

7.8

7. 2

1.03